Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Document Page 1 of 54

| Fill in this information to identify your case: |                                 |                                   |
|---|---------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   |                                 |                                   |
| Case number (if known)                          | _ Chapter you are filing under: |                                   |
|   | Chapter 7                       |                                   |
|   | ☐ Chapter 11                    |                                   |
|   | ☐ Chapter 12                    |                                   |
|   | ☐ Chapter 13                    | ☐ Check if this an amended filing |

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself   |  |   |
|-----|--|--|---|
|     |  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):                     |
| 1.  | Your full name   |  |   |
|     | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee. | Panayotis First name  J. Middle name  Koutropoulos  Last name and Suffix (Sr., Jr., II, III) | First name  Middle name  Last name and Suffix (Sr., Jr., II, III) |
| 2.  | All other names you have used in the last 8 years Include your married or maiden names.  | Peter Koutropoulos   |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)  | xxx-xx-9285  |   |

Case 16-39273 Doc 1 Filed 12/14/16

Entered 12/14/16 08:13:50 Page 2 of 54

Desc Main 12/14/16 7:48AM Document Case number (if known) Debtor 1 Panayotis J. Koutropoulos

|  |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |  |  |
|--|---|---|--|--|--|
| 4. Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years |   | ■ I have not used any business name or EINs.  | ☐ I have not used any business name or EINs.   |  |  |
|  | Include trade names and doing business as names | Business name(s)  | Business name(s)   |  |  |
|  |   | EINs  | EINs   |  |  |
| 5.   | Where you live                                  | 4040 Descharted and   | If Debtor 2 lives at a different address:  |  |  |
|  |   | 1210 Dorchester Lane<br>Hoffman Estates, IL 60169   |  |  |  |
|  |   | Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code   |  |  |
|  |   | Cook<br>County  | County   |  |  |
|  |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |  |  |
|  |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |  |  |
| 6.   | Why you are choosing this district to file for  | Check one:  | Check one:   |  |  |
|  | bankruptcy                                      | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |  |  |
|  |   | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |  |  |
|  |   |   |  |  |  |

Case 16-39273 Doc 1 Filed 12/14/16

Document

Entered 12/14/16 08:13:50 Page 3 of 54 Case number (if known)

Desc Main 12/14/16 7:48AM

Debtor 1 Panayotis J. Koutropoulos

| ar                              | 2: Tell the Court About   | Your Ba | nkruptcy Ca                     | ise   |  |   |                      |  |
|---------------------------------|---|---------|---------------------------------|---|--|---|----------------------|--|
| <b>'</b> .                      | The chapter of the Bankruptcy Code you are  |         |                                 |   | of each, see <i>Notice Required by</i> page 1 and check the appropriat | 11 U.S.C. § 342(b) for Individuals Filin<br>e box.  | g for Bankruptcy     |  |
|                                 | choosing to file under  | ■ Ch    | apter 7                         |   |  |   |                      |  |
|                                 |   | ☐ Ch    | apter 11                        |   |  |   |                      |  |
|                                 |   | ☐ Ch    | apter 12                        |   |  |   |                      |  |
|                                 |   | ☐ Ch    | apter 13                        |   |  |   |                      |  |
| 3.                              | How you will pay the fee  |         | about how yo                    | ou may pay. Typi<br>attorney is subn  | cally, if you are paying the fee yo                                    | k with the clerk's office in your local co<br>burself, you may pay with cash, cashie<br>alf, your attorney may pay with a credi | r's check, or money  |  |
|                                 |   |         |                                 |   | allments. If you choose this options (Official Form 103A).             | on, sign and attach the Application for   | Individuals to Pay   |  |
|                                 |   | I       | but is not req<br>applies to yo | st that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may trequired to, waive your fee, and may do so only if your income is less than 150% of the official poverty line to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill dication to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. |  |   |                      |  |
| D. Have you filed for ■ No. No. |   |         |                                 |   |  |   |                      |  |
|                                 | last 8 years?   | ☐ Yes   | S.                              |   |  |   |                      |  |
|                                 |   |         | District                        |   | When   | Case number   |                      |  |
|                                 |   |         | District                        |   | When   | Case number   |                      |  |
|                                 |   |         | District                        |   | When   | Case number   |                      |  |
| 0.                              | Are any bankruptcy cases pending or being   | ■ No    |                                 |   |  |   |                      |  |
|                                 | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | ☐ Yes   | S.                              |   |  |   |                      |  |
|                                 |   |         | Debtor                          |   |  | Relationship to you   |                      |  |
|                                 |   |         | District                        |   | When   | Case number, if known   |                      |  |
|                                 |   |         | Debtor                          |   |  | Relationship to you   |                      |  |
|                                 |   |         | District                        |   | When   | Case number, if known   |                      |  |
| 1.                              | Do you rent your residence?   | □ No.   |                                 | ine 12.   |  |   |                      |  |
|                                 |   | Yes     | s. Has yo                       | our landlord obta   | ined an eviction judgment agains                                       | et you and do you want to stay in your  | residence?           |  |
|                                 |   |         |                                 | No. Go to line 1  | 2.   |   |                      |  |
|                                 |   |         |                                 | Yes. Fill out <i>Init</i> bankruptcy peti   |  | Judgment Against You (Form 101A) ai   | nd file it with this |  |

Entered 12/14/16 08:13:50 Page 4 of 54 Case 16-39273 Doc 1 Filed 12/14/16

Document

Desc Main 12/14/16 7:48AM

Case number (if known) Debtor 1 Panayotis J. Koutropoulos

| art  | 3: Report About Any Bu  | sinesses `             | You Own as a Sole Propri   | etor  |  |  |  |
|------|---|------------------------|--|---|--|--|--|
| 12.  | Are you a sole proprietor of any full- or part-time business?   | ■ No.                  | Go to Part 4.  |   |  |  |  |
|      |   | ☐ Yes.                 | Name and location of bu  | Name and location of business   |  |  |  |
|      | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |                        | Name of business, if any   |   |  |  |  |
|      | If you have more than one sole proprietorship, use a separate sheet and attach  |                        | Number, Street, City, St   | ate & ZIP Code  |  |  |  |
|      | it to this petition.  |                        | Check the appropriate b  | ox to describe your business:   |  |  |  |
|      |   |                        | ☐ Health Care Bus  | iness (as defined in 11 U.S.C. § 101(27A))  |  |  |  |
|      |   |                        | ☐ Single Asset Rea   | al Estate (as defined in 11 U.S.C. § 101(51B))  |  |  |  |
|      |   |                        | ☐ Stockbroker (as)   | defined in 11 U.S.C. § 101(53A))  |  |  |  |
|      |   |                        | ☐ Commodity Brok   | er (as defined in 11 U.S.C. § 101(6))   |  |  |  |
|      |   |                        | ☐ None of the above  | ve  |  |  |  |
| 13.  | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a <i>small business</i><br>debtor?  | deadlines<br>operation | you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, stateme terations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proce 11 U.S.C. 1116(1)(B). |   |  |  |  |
|      | For a definition of small   | ■ No.                  | I am not filing under Cha  | apter 11.   |  |  |  |
|      | business debtor, see 11 U.S.C. § 101(51D).  | □ No.                  | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.   |   |  |  |  |
|      |   | ☐ Yes.                 | I am filing under Chapte   | r 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |  |  |  |
| Part | A: Report if You Own or   | Have Any               | Hazardous Property or A  | ny Property That Needs Immediate Attention  |  |  |  |
|      | <u> </u>  |                        | Tiazardous Froperty of A   | Troporty mac recess miniculate Attention  |  |  |  |
| 14.  | Do you own or have any property that poses or is alleged to pose a threat of imminent and   | ■ No. □ Yes.           | What is the hazard?  |   |  |  |  |
|      | identifiable hazard to<br>public health or safety?<br>Or do you own any<br>property that needs<br>immediate attention?  |                        | If immediate attention is needed, why is it needed?  |   |  |  |  |
|      | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?   |                        | Where is the property?   | Number, Street, City, State & Zip Code  |  |  |  |
|      |   |                        |  |   |  |  |  |

Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Document Page 5 of 54

Debtor 1 Panayotis J. Koutropoulos

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

12/14/16 7:48AM

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-39273 D

Doc 1 Filed 12/14/16 Document Entered 12/14/16 08:13:50

Desc Main

12/14/16 7·48AM

Debtor 1 Panayotis J. Koutropoulos

ocument Page 6 of 54 Case number (if known)

| Part | 6: Answer These Questi   | ons for R  | eporting Purposes   |  |                        |   |  |  |  |
|------|--|--|---|--|------------------------|---|--|--|--|
| 16.  | What kind of debts do you have?                                | 16a.   | Are your debts primarily consu individual primarily for a personal  |  |                        | n 11 U.S.C. § 101(8) as "incurred by an                             |  |  |  |
|      |  |  | ☐ No. Go to line 16b.   |  |                        |   |  |  |  |
|      |  |  | ■ Yes. Go to line 17.   |  |                        |   |  |  |  |
|      |  | 16b.   | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.        |  |                        |   |  |  |  |
|      |  |  | □ No. Go to line 16c.   |  |                        |   |  |  |  |
|      |  |  | ☐ Yes. Go to line 17.   |  |                        |   |  |  |  |
|      |  | 16c.   | State the type of debts you owe the   | hat are not consumer d   | ebts or business deb   | ots   |  |  |  |
| 17.  | Are you filing under<br>Chapter 7?                             | □ No.  | I am not filing under Chapter 7. G  | So to line 18.   |                        |   |  |  |  |
|      | Do you estimate that after any exempt property is excluded and | ■ Yes.   | I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? |  |                        |   |  |  |  |
|      | administrative expenses<br>are paid that funds will            |  | No  |  |                        |   |  |  |  |
|      | be available for distribution to unsecured creditors?          |  | ☐ Yes   |  |                        |   |  |  |  |
| 18.  | How many Creditors do  | <b>1</b> -49   |   | <b>1</b> ,000-5,000  |                        | ☐ 25,001-50,000   |  |  |  |
|      | you estimate that you owe?                                     | □ 50-99  |   | ☐ 5001-10,000  |                        | 50,001-100,000  |  |  |  |
|      |  | ☐ 100-1<br>☐ 200-9   |   | □ 10,001-25,000  |                        | ☐ More than100,000  |  |  |  |
| 19.  | How much do you  | <b>\$0 - \$</b>  | 50,000  | □ \$1,000,001 - \$10   | million                | □ \$500,000,001 - \$1 billion                                       |  |  |  |
|      | estimate your assets to be worth?                              |  | 01 - \$100,000  | □ \$10,000,001 - \$50  |                        | \$1,000,000,001 - \$10 billion                                      |  |  |  |
|      |  | □ \$100,001 - \$500,000<br>□ \$500,001 - \$1 million   |   | □ \$50,000,001 - \$10<br>□ \$100,000,001 - \$8                 |                        | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion          |  |  |  |
| 20.  | How much do you  | □ \$0 - \$   | 50,000  | □ \$1,000,001 - \$10   | million                | □ \$500,000,001 - \$1 billion                                       |  |  |  |
|      | estimate your liabilities to be?                               | \$50,001 - \$100,000   |   | □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion |                        |   |  |  |  |
|      |  |  | 001 - \$500,000<br>001 - \$1 million  | □ \$50,000,001 - \$10<br>□ \$100,000,001 - \$5                 |                        | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion          |  |  |  |
| Part | 7: Sign Below  |  |   |  |                        |   |  |  |  |
| For  | you  | I have ex  | camined this petition, and I declare  | under penalty of perjury                                       | y that the information | n provided is true and correct.                                     |  |  |  |
|      |  |  | chosen to file under Chapter 7, I an<br>tates Code. I understand the relief   |  |                        | er Chapter 7, 11,12, or 13 of title 11, to proceed under Chapter 7. |  |  |  |
|      |  | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). |   |  |                        |   |  |  |  |
|      |  | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.   |   |  |                        |   |  |  |  |
|      |  | bankrupt<br>and 3571   |   |  |                        |   |  |  |  |
|      |  | Panayo   | ayotis J. Koutropoulos<br>tis J. Koutropoulos<br>e of Debtor 1  | Sign   | nature of Debtor 2     |   |  |  |  |
|      |  | Executed   | d on <b>December 14, 2016</b>   | Exe  | cuted on               |   |  |  |  |
|      | MM / DD / YYYY   |  |   |  |                        | / YYYY  |  |  |  |

Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Document Page 7 of 54

Debtor 1 Panayotis J. Koutropoulos

Case number (if known)

12/14/16 7:48AM

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ David M. Siegel                      | Date          | December 14, 2016 |
|--|---------------|-------------------|
| Signature of Attorney for Debtor         | _             | MM / DD / YYYY    |
| David M. Siegel                          |               |                   |
| Printed name                             |               |                   |
| David M. Siegel & Associates             |               |                   |
| Firm name                                |               |                   |
| 790 Chaddick Drive<br>Wheeling, IL 60090 |               |                   |
| Number, Street, City, State & ZIP Code   |               |                   |
| Contact phone <b>(847) 520-8100</b>      | Email address |                   |
| #06207611                                |               |                   |
| Bar number & State                       |               |                   |

| Case 16-39273             | Doc 1    | Filed 12/14/16 | Entered 12/14/16 08:13:50 | Desc Main |
|---------------------------|----------|----------------|---------------------------|-----------|
|                           |          | Document       | Page 8 of 54              |           |
| nformation to identify yo | ur case: |                |                           |           |

| Fill in this information to identify your case: |                  |                   |             |  |                     |  |
|---|------------------|-------------------|-------------|--|---------------------|--|
| Debtor 1  | Panayotis J. Kou | tropoulos         |             |  |                     |  |
|   | First Name       | Middle Name       | Last Name   |  |                     |  |
| Debtor 2  |                  |                   |             |  |                     |  |
| (Spouse if, filing)                             | First Name       | Middle Name       | Last Name   |  |                     |  |
| United States Bankruptcy Court for the:         |                  | NORTHERN DISTRICT | OF ILLINOIS |  |                     |  |
| Case number                                     |                  |                   |             |  |                     |  |
| (if known)                                      |                  |                   |             |  | Check if this is an |  |
|   |                  |                   |             |  | amended filing      |  |

# Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filling amended schedules after you file

|     |  | Your as      | ssets<br>of what you own      |
|-----|--|--------------|-------------------------------|
| 1.  | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B   | \$           | 0.00                          |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$           | 10,350.00                     |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$           | 10,350.00                     |
| Par | t 2: Summarize Your Liabilities  |              |                               |
|     |  |              | <b>abilities</b><br>t you owe |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$           | 0.00                          |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$           | 4,000.00                      |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$           | 51,554.00                     |
|     | Your total liabilities   | \$           | 55,554.00                     |
| Par | t 3: Summarize Your Income and Expenses  |              |                               |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$           | 3,732.00                      |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$           | 4,070.00                      |
| Par | t 4: Answer These Questions for Administrative and Statistical Records   |              |                               |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ır other sch | nedules.                      |
| 7.  | ■ Yes What kind of debt do you have?   |              |                               |

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/14/16 7:48AM

12/15

Entered 12/14/16 08:13:50 Desc Main Filed 12/14/16 Case 16-39273 Doc 1

Document

Page 9 of 54 Case number (if known) Debtor 1 Panayotis J. Koutropoulos

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 3,732.00 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following:   | Total clair | n        |
|--|-------------|----------|
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00     |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 4,000.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00     |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00     |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00     |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00     |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 4,000.00 |

Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Document Page 10 of 54 Fill in this information to identify your case and this filing: Debtor 1 Panayotis J. Koutropoulos Last Name Middle Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put **BMW** 3.1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **X5** Creditors Who Have Claims Secured by Property. Debtor 1 only Model: 2000 Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$2,500.00 \$2,500.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$2,500,00 pages you have attached for Part 2. Write that number here.......>>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

Desc Main Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Page 11 of 54
Case number (if known) Document Debtor 1 Panayotis J. Koutropoulos Yes. Describe..... \$750.00 **Household Goods & Furniture** 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... \$350.00 TV & Electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Normal Apparel \$800.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$250.00 Watches 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list

No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....

\$2,150.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Official Form 106A/B Software Copyright (c) 1996-2016 Best Case, LLC - www.bestcase.com Schedule A/B: Property

page 2

Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Page 12 of 54
Case number (if known) Document Debtor 1 Panayotis J. Koutropoulos claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Checking/Savings \$2,500.00 17.1. Account Chase Bank & Citi Bank **Savings Account** 17.2. Chase Bank & Citi Bank \$0.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

□ No

Institution name or individual: ■ Yes. .....

**Security Deposit** 

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

\$3,200.00

| Debt         | or 1   | Case 16-39273  Panayotis J. Koutropo                                       | Doc 1                       | Filed 12/14/16<br>Document | Entered 12/14/16 08:13:50<br>Page 13 of 54<br>Case number (if known) | Desc Main   |  |
|--------------|--|--|-----------------------------|----------------------------|--|---|--|
|              |  |  |                             |                            |  |   |  |
|              |  | Give specific information ab   |                             |                            |  |   |  |
|              |  | s, copyrights, trademarks, ples: Internet domain names,                    |                             |                            |  |   |  |
|              |  | Give specific information ab   | out them                    |                            |  |   |  |
|              |  | es, franchises, and other goles: Building permits, exclus                  |                             |                            | n holdings, liquor licenses, professional licens                     | es  |  |
|              |  | Give specific information ab   | out them                    |                            |  |   |  |
| Mon          | ey or  | property owed to you?  |                             |                            |  | Current value of the portion you own? Do not deduct secured claims or exemptions. |  |
| 28. <b>T</b> | ax ref   | funds owed to you  |                             |                            |  |   |  |
|              | No<br>Yes.   | Give specific information abo  | out them, inc               | luding whether you alre    | ady filed the returns and the tax years                              |   |  |
|              | 29. Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement  ■ No  □ Yes. Give specific information   |  |                             |                            |  |   |  |
|              | 30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else  ■ No  ☐ Yes. Give specific information |  |                             |                            |  |   |  |
|              |  | sts in insurance policies<br>oles: Health, disability, or life             | insurance; h                | ealth savings account (    | HSA); credit, homeowner's, or renter's insural                       | nce   |  |
|              | No   |  |                             |                            |  |   |  |
| Ц            | l Yes.   | Name the insurance compar<br>Comp  | ny of each po<br>pany name: | blicy and list its value.  | Beneficiary:   | Surrender or refund value:  |  |
| ا<br>ع       | f you a  | terest in property that is duare the beneficiary of a living one has died. |                             |                            | ed<br>surance policy, or are currently entitled to rec               | eive property because   |  |
|              | Yes.   | Give specific information  |                             |                            |  |   |  |
|              | Exam <sub>l</sub><br>No  | against third parties, whe<br>oles: Accidents, employment                  |                             |                            | it or made a demand for payment<br>s to sue                          |   |  |
|              |  |  | d alaima of                 | overv neture includin      | g counterclaims of the debtor and rights to                          | a not off alaims  |  |
| -            | No   | Describe each claim  | ed claims or                | every nature, including    | g counterclaims of the debtor and rights to                          | Set on claims   |  |
|              |  | nancial assets you did not   | already list                |                            |  |   |  |
| -            | No   | Give specific information  | unoudy list                 |                            |  |   |  |
|              |  | the dollar value of all of you   |                             | om Part 4, including a     | ny entries for pages you have attached                               | \$5,700.00  |  |

|               | Case 16-39273   | Doc 1           | Filed 12/14/16<br>Document | Entered 12<br>Page 14 of | 2/14/16 08:13:50<br>54   | Desc Main | 12/14/16 7:48AN |
|---------------|---|-----------------|----------------------------|--------------------------|--------------------------|-----------|-----------------|
| Debto         | Panayotis J. Koutrop  | oulos           |                            |                          | Case number (if known)   |           |                 |
| Part 5:       | Describe Any Business-Related                                       | Property You    | Own or Have an Interest    | In. List any real esta   | ate in Part 1.           |           |                 |
| 37 <b>Do</b>  | you own or have any legal or equi                                   | itable interest | in any business-related p  | roperty?                 |                          |           |                 |
|               | o. Go to Part 6.  |                 | ,                          |                          |                          |           |                 |
| _             | es. Go to line 38.  |                 |                            |                          |                          |           |                 |
|               |   |                 |                            |                          |                          |           |                 |
| Part 6:       | Describe Any Farm- and Commo  |                 |                            | n or Have an Interes     | st In.                   |           |                 |
| 46. <b>Do</b> | you own or have any legal or  | equitable in    | nterest in any farm- or    | commercial fishir        | ng-related property?     |           |                 |
|               | No. Go to Part 7.   |                 |                            |                          |                          |           |                 |
|               | Yes. Go to line 47.   |                 |                            |                          |                          |           |                 |
| Part 7:       |   |                 |                            | d Not List Above         |                          |           |                 |
|               | you have other property of a<br>kamples: Season tickets, country No |                 |                            |                          |                          |           |                 |
|               | es. Give specific information                                       |                 |                            |                          |                          |           |                 |
| 54. <b>A</b>  | dd the dollar value of all of yo                                    | our entries f   | om Part 7. Write that n    | umber here               |                          |           | \$0.00          |
| Part 8:       | List the Totals of Each Part  | of this Form    |                            |                          |                          |           |                 |
| 55. <b>P</b>  | art 1: Total real estate, line 2                                    |                 |                            |                          |                          |           | \$0.00          |
| 56. <b>P</b>  | art 2: Total vehicles, line 5                                       |                 |                            | \$2,500.00               |                          |           |                 |
| 57. <b>P</b>  | art 3: Total personal and hou                                       | sehold item     | s, line 15                 | \$2,150.00               |                          |           |                 |
| 58. <b>P</b>  | art 4: Total financial assets, li                                   | ine 36          |                            | \$5,700.00               |                          |           |                 |
| 59. <b>P</b>  | art 5: Total business-related                                       | property, lin   | e 45                       | \$0.00                   |                          |           |                 |
|               | art 6: Total farm- and fishing-                                     |                 |                            | \$0.00                   |                          |           |                 |
| 61. <b>P</b>  | art 7: Total other property no                                      | t listed, line  | 54 +                       | \$0.00                   |                          |           |                 |
| 62. <b>T</b>  | otal personal property. Add lir                                     | nes 56 throug   | jh 61                      | \$10,350.00              | Copy personal property t | otal      | \$10,350.00     |

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$10,350.00

Document Page 15 of 54 Fill in this information to identify your case: Panayotis J. Koutropoulos Debtor 1 Middle Name Last Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

# Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the<br>portion you own | Amount of the exemption you claim           |   | Specific laws that allow exemption  |  |
|---|---|---|---|--|
| Copy the value from<br>Schedule A/B     | Che   | ck only one box for each exemption.                             |   |  |
| \$2,500.00                              |   | \$2,400.00  | 735 ILCS 5/12-1001(c)   |  |
|   |   | 100% of fair market value, up to any applicable statutory limit |   |  |
| \$2,500.00                              |   | \$100.00  | 735 ILCS 5/12-1001(b)   |  |
|   |   | 100% of fair market value, up to any applicable statutory limit |   |  |
| \$750.00                                |   | \$750.00  | 735 ILCS 5/12-1001(b)   |  |
|   |   | 100% of fair market value, up to any applicable statutory limit |   |  |
| \$350.00                                |   | \$350.00  | 735 ILCS 5/12-1001(b)   |  |
|   |   | 100% of fair market value, up to any applicable statutory limit |   |  |
| \$800.00                                |   | \$800.00  | 735 ILCS 5/12-1001(a)   |  |
|   |   | 100% of fair market value, up to any applicable statutory limit |   |  |
|   | \$2,500.00 \$2,500.00 \$2,500.00 \$2,500.00 | \$2,500.00  | Copy the value from Schedule A/B  \$2,500.00  \$2,400.00  100% of fair market value, up to any applicable statutory limit  \$750.00  \$750.00  \$100% of fair market value, up to any applicable statutory limit  \$750.00  \$750.00  \$100% of fair market value, up to any applicable statutory limit  \$350.00  \$350.00  \$350.00  \$350.00  \$3800.00  \$800.00  \$100% of fair market value, up to any applicable statutory limit |  |

12/14/16 7:48AM Document Page 16 of 54 Panayotis J. Koutropoulos Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Watches 735 ILCS 5/12-1001(b) \$250.00 \$250.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Checking/Savings Account: Chase** 735 ILCS 5/12-1001(b) \$2,500.00 \$2,500.00 Bank & Citi Bank Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Savings Account** 735 ILCS 5/12-1001(b) \$0.00 \$0.00 Chase Bank & Citi Bank Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **Security Deposit** 735 ILCS 5/12-1001(b) \$3,200.00 \$3,200.00 Line from Schedule A/B: 22.1 100% of fair market value, up to any applicable statutory limit

| 3. | you claiming a homestead exemption of more than \$160,375?  oject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) |
|----|--|
|    | No   |
|    | Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?   |
|    | □ No   |
|    | ☐ Yes  |

|   |                  | DOGUITIE          | <u>:11 Paue 17 0154</u> |  |  |  |
|---|------------------|-------------------|-------------------------|--|--|--|
| Fill in this information to identify your case: |                  |                   |                         |  |  |  |
| Debtor 1  | Panayotis J. Kou | tropoulos         |                         |  |  |  |
|   | First Name       | Middle Name       | Last Name               |  |  |  |
| Debtor 2  |                  |                   |                         |  |  |  |
| (Spouse if, filing)                             | First Name       | Middle Name       | Last Name               |  |  |  |
| United States Bankruptcy Court for the:         |                  | NORTHERN DISTRICT | OF ILLINOIS             |  |  |  |
| Case number                                     |                  |                   |                         |  |  |  |
| (if known)                                      |                  |                   |                         |  |  |  |
|   |                  |                   |                         |  |  |  |

### Official Form 106D

# Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

Desc Main Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50

Document Page 18 of 54 Fill in this information to identify your case: Debtor 1 Panavotis J. Koutropoulos Middle Name Last Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? ☐ No. Go to Part 2. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim Priority** Nonpriority amount 2.1 IRS \$4,000.00 \$4,000.00 \$0.00 Last 4 digits of account number Priority Creditor's Name **Internal Revenue Service** 2012, 2013, 2014 & P.O. Box 7346 When was the debt incurred? 2015 Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes **Income Taxes** Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Document

Page 19 of 54
Case number (if know)

| Debtor | Panayotis J. Koutropoulos   |  | Case number (if know)                                       |            |  |  |  |
|--------|---|--|---|------------|--|--|--|
| 4.1    | AMEX Nonpriority Creditor's Name  | Last 4 digits of account number  | 3437  | \$7,083.00 |  |  |  |
|        | Bankruptcy Department PO Box 981535 EI Paso, TX 79998-1535 Number Street City State Zlp Code                              | When was the debt incurred?  As of the date you file, the claim in   | Opened 4/01/07 Last Active 12/17/14                         |            |  |  |  |
|        | Who incurred the debt? Check one.   | As of the date you me, the claim   | <b>э.</b> Опеск ан шаг арргу                                |            |  |  |  |
|        | ■ Debtor 1 only   | ☐ Contingent   |   |            |  |  |  |
|        | Debtor 2 only   | ☐ Unliquidated   |   |            |  |  |  |
|        | Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |  |  |  |
|        | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured  | d claim:  |            |  |  |  |
|        | ☐ Check if this claim is for a community  | Student loans  |   |            |  |  |  |
|        | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims   | ration agreement or divorce that you did not                |            |  |  |  |
|        | ■ No  | Debts to pension or profit-sharing   | g plans, and other similar debts                            |            |  |  |  |
|        | Yes   | Other. Specify Purchases   |   |            |  |  |  |
| 4.2    | Avant Credit Corporation Nonpriority Creditor's Name  | Last 4 digits of account number  | 3572  | \$0.00     |  |  |  |
|        | 640 N Lasalle St<br>Chicago, IL 60654   | When was the debt incurred?  | Opened 7/01/14 Last Active 10/09/14                         |            |  |  |  |
|        | Number Street City State Zlp Code   | As of the date you file, the claim i   | is: Check all that apply                                    |            |  |  |  |
|        | Who incurred the debt? Check one.   |  |   |            |  |  |  |
|        | Debtor 1 only   | ☐ Contingent   |   |            |  |  |  |
|        | Debtor 2 only   | ☐ Unliquidated   |   |            |  |  |  |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |  |  |  |
|        | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured  |   |            |  |  |  |
|        | ☐ Check if this claim is for a community  | Student loans  |   |            |  |  |  |
|        | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims   |   |            |  |  |  |
|        | No  | Debts to pension or profit-sharing   |   |            |  |  |  |
|        | ☐ Yes   | Other. Specify NOTICE ON   |   |            |  |  |  |
| 4.3    | Cap One   | Last 4 digits of account number  | 5089  | \$0.00     |  |  |  |
| -      | Nonpriority Creditor's Name Bankruptcy Dept. PO Box 30285 Salt Lake City, UT 84130-0285 Number Street City State Zlp Code | When was the debt incurred?  As of the date you file, the claim in   | Opened 9/01/06 Last Active 4/03/13 is: Check all that apply |            |  |  |  |
|        | Who incurred the debt? Check one.   |  |   |            |  |  |  |
|        | ■ Debtor 1 only   | ☐ Contingent   |   |            |  |  |  |
|        | ☐ Debtor 2 only   | ☐ Unliquidated   |   |            |  |  |  |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |  |  |  |
|        | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured  |   |            |  |  |  |
|        | ☐ Check if this claim is for a community  | ☐ Student loans  |   |            |  |  |  |
|        | debt Is the claim subject to offset?  | <ul> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>☐ Debts to pension or profit-sharing plans, and other similar debts</li> <li>■ Other. Specify</li> </ul> NOTICE ONLY |   |            |  |  |  |
|        | ■ No  |  |   |            |  |  |  |
|        | ☐ Yes   |  |   |            |  |  |  |

| Debtor | Panayotis J. Koutropoulos   | ——————————————————————————————————————  | Case number (if know)  |            |  |  |  |  |
|--------|---|---|--|------------|--|--|--|--|
| 4.4    | CB/Express Nonpriority Creditor's Name                              | Last 4 digits of account number   | 8965   | \$0.00     |  |  |  |  |
|        | O Box 337003<br>orthGlenn, CO 80233-7003                            | When was the debt incurred?   | Opened 5/01/13 Last Active 11/25/14  |            |  |  |  |  |
|        | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim  | s: Check all that apply  |            |  |  |  |  |
|        | ■ Debtor 1 only   | ☐ Contingent  |  |            |  |  |  |  |
|        | ☐ Debtor 2 only   | ☐ Unliquidated  |  |            |  |  |  |  |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |  |  |  |  |
|        | ☐ At least one of the debtors and another                           | Type of NONPRIORITY unsecured   | d claim:   |            |  |  |  |  |
|        | ☐ Check if this claim is for a community                            | ☐ Student loans   |  |            |  |  |  |  |
|        | debt Is the claim subject to offset?                                | report as priority claims   | ration agreement or divorce that you did not   |            |  |  |  |  |
|        | No  | Debts to pension or profit-sharing  | g plans, and other similar debts   |            |  |  |  |  |
|        | Yes   | Other. Specify NOTICE ON  | ILY  |            |  |  |  |  |
| 4.5    | Chase   | Last 4 digits of account number   | 4418   | \$2,994.00 |  |  |  |  |
|        | Nonpriority Creditor's Name   |   | Opened 1/01/08 Last Active   |            |  |  |  |  |
|        | P.o. Box 15298  | When was the debt incurred?   | 9/21/14  |            |  |  |  |  |
|        | Wilmington, DE 19850  Number Street City State Zlp Code             | As of the date you file, the claim i  | s: Chock all that apply  |            |  |  |  |  |
|        | Who incurred the debt? Check one.                                   | As of the date you me, the claim  | The strain state of the state o |            |  |  |  |  |
|        | ■ Debtor 1 only   | ☐ Contingent  |  |            |  |  |  |  |
|        | Debtor 2 only   | ☐ Unliquidated  |  |            |  |  |  |  |
|        | Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |  |  |  |  |
|        | At least one of the debtors and another                             | Type of NONPRIORITY unsecured   |  |            |  |  |  |  |
|        | ☐ Check if this claim is for a community                            | ☐ Student loans   |  |            |  |  |  |  |
|        | debt  | ☐ Obligations arising out of a sepa   |  |            |  |  |  |  |
|        | Is the claim subject to offset?                                     | report as priority claims   |  |            |  |  |  |  |
|        | ■ No  | Debts to pension or profit-sharing  |  |            |  |  |  |  |
|        | Yes   | Other. Specify Purchases  |  |            |  |  |  |  |
| 4.6    | Chase   | Last 4 digits of account number   | 5825   | \$2,889.00 |  |  |  |  |
|        | P.o. Box 15298 Wilmington, DE 19850                                 | When was the debt incurred?   | Opened 9/01/04 Last Active 9/21/14   |            |  |  |  |  |
|        | Number Street City State Zlp Code                                   | As of the date you file, the claim i  | s: Check all that apply  |            |  |  |  |  |
|        | Who incurred the debt? Check one.                                   | •   |  |            |  |  |  |  |
|        | ■ Debtor 1 only   | ☐ Contingent  |  |            |  |  |  |  |
|        | Debtor 2 only   | ☐ Unliquidated  |  |            |  |  |  |  |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |  |  |  |  |
|        | ☐ At least one of the debtors and another                           | Type of NONPRIORITY unsecured   |  |            |  |  |  |  |
|        | ☐ Check if this claim is for a community                            | ☐ Student loans   |  |            |  |  |  |  |
|        | debt Is the claim subject to offset?                                | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |  |            |  |  |  |  |
|        | ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts                                       |  |            |  |  |  |  |
|        | Yes   | Other. Specify Purchases  |  |            |  |  |  |  |

Page 21 of 54 Document Case number (if know)

Debtor 1 Panayotis J. Koutropoulos 4.7 \$7,182.00 **Chase Bank** Last 4 digits of account number 5848 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 9/01/12 Last Active Po Box 15298 When was the debt incurred? 11/27/14 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Purchases** Other, Specify 4.8 Citi Last 4 digits of account number 9164 \$521.00 Nonpriority Creditor's Name Attn: Bankruptcy Department When was the debt incurred? 2/12 PO Box 6241 Sioux Falls, SD 57717 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Purchases** Other. Specify 4.9 Citi Last 4 digits of account number \$10,238.00 Nonpriority Creditor's Name Attn: Bankruptcy Department When was the debt incurred? PO Box 6241 Sioux Falls, SD 57717 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections ☐ Yes

Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Case 16-39273 Doc 1

Document

Page 22 of 54 Case number (if know)

|          | iscover Bank   | Last 4 digits of account number                              | 7788  | \$4,172.00 |
|----------|--|--|---|------------|
| P        | onpriority Creditor's Name  O Box 15316  Illimington, DE 19850                       | When was the debt incurred?                                  | 3/11  |            |
| Nu       | Immigron, DE 19630 Imber Street City State Zlp Code ho incurred the debt? Check one. | As of the date you file, the claim                           | is: Check all that apply                      |            |
|          | Debtor 1 only  | ☐ Contingent   |   |            |
|          | Debtor 2 only  | ☐ Unliquidated   |   |            |
|          | Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |            |
|          | At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:                                      |            |
|          | Check if this claim is for a community   | ☐ Student loans  |   |            |
| de<br>Is | bt<br>the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |            |
|          | No   | Debts to pension or profit-sharing                           | g plans, and other similar debts              |            |
|          | Yes  | Other. Specify Purchases                                     |   |            |
|          | rfrd Cus Ac onpriority Creditor's Name   | Last 4 digits of account number                              | 3781  | \$0.00     |
| Po       | o Box 94498<br>as Vegas, NV 89193  | When was the debt incurred?                                  | Opened 3/01/13 Last Active 12/19/14           |            |
| Nu       | umber Street City State Zlp Code ho incurred the debt? Check one.                    | As of the date you file, the claim                           | is: Check all that apply                      |            |
|          | Debtor 1 only  | ☐ Contingent   |   |            |
|          | Debtor 2 only  | ☐ Unliquidated   |   |            |
|          | Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |            |
|          | At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:                                      |            |
|          | Check if this claim is for a community   | ☐ Student loans  |   |            |
| de<br>Is | bt<br>the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |            |
|          | No   | Debts to pension or profit-sharing                           | g plans, and other similar debts              |            |
|          | Yes  | Other. Specify NOTICE ON                                     | NLY   |            |
|          | uick Lane/Citi CBNA  | Last 4 digits of account number                              | 0127  | \$1,384.00 |
| P        | onpriority Creditor's Name  O Box 6497  ioux Falls, SD 57117                         | When was the debt incurred?                                  | 11/13   |            |
| Nu       | umber Street City State Zlp Code ho incurred the debt? Check one.                    | As of the date you file, the claim                           | is: Check all that apply                      |            |
|          | Debtor 1 only  | ☐ Contingent   |   |            |
|          | Debtor 2 only  | ☐ Unliquidated   |   |            |
|          | Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |            |
|          | At least one of the debtors and another  | Type of NONPRIORITY unsecure                                 | d claim:                                      |            |
|          | Check if this claim is for a community   | ☐ Student loans  |   |            |
| de       |  | Obligations arising out of a separeport as priority claims   | aration agreement or divorce that you did not |            |
|          | No   | Debts to pension or profit-sharing                           | g plans, and other similar debts              |            |
|          | Yes  | ■ Other. Specify Purchases                                   |   |            |

Debtor 1 Panayotis J. Koutropoulos

Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Case 16-39273 Doc 1

Document

Page 23 of 54 Case number (if know)

| SYNCB/Care Credit   | Last 4 digits of account number                              | 2720  | \$2,722.00 |
|---|--|---|------------|
| Nonpriority Creditor's Name PO Box 965036                     | When was the debt incurred?                                  | 11/12   |            |
| Orlando, FL 32896-5036  Number Street City State Zlp Code     | As of the date you file, the claim                           | is: Check all that apply                      |            |
| Who incurred the debt? Check one.                             | 7.5 6 44.0 , 64 , 6.4  | St. St. St. all and apply                     |            |
| Debtor 1 only   | ☐ Contingent   |   |            |
| Debtor 2 only   | ☐ Unliquidated   |   |            |
| ☐ Debtor 1 and Debtor 2 only                                  | ☐ Disputed   |   |            |
| ☐ At least one of the debtors and another                     | Type of NONPRIORITY unsecure                                 | d claim:                                      |            |
| ☐ Check if this claim is for a community                      | ☐ Student loans  |   |            |
| debt<br>s the claim subject to offset?                        | Obligations arising out of a separeport as priority claims   | aration agreement or divorce that you did not |            |
| No  | Debts to pension or profit-sharing                           | ng plans, and other similar debts             |            |
| ☐ Yes   | Other. Specify Purchases                                     |   |            |
| SYNCB/HH Gregg  | Last 4 digits of account number                              | 2904  | \$5,570.00 |
| Nonpriority Creditor's Name PO Box 965036                     | When was the debt incurred?                                  | 9/12  |            |
| O Box 963036<br>Orlando, FL 32896                             | when was the debt incurred?                                  | 9/12  |            |
| Number Street City State Zlp Code                             | As of the date you file, the claim                           | is: Check all that apply                      |            |
| Vho incurred the debt? Check one.                             |  |   |            |
| Debtor 1 only   | ☐ Contingent   |   |            |
| Debtor 2 only   | ☐ Unliquidated   |   |            |
| Debtor 1 and Debtor 2 only                                    | ☐ Disputed   |   |            |
| At least one of the debtors and another                       | Type of NONPRIORITY unsecure                                 | d claim:                                      |            |
| ☐ Check if this claim is for a community                      | ☐ Student loans  |   |            |
| s the claim subject to offset?                                | report as priority claims                                    | aration agreement or divorce that you did not |            |
| No  | Debts to pension or profit-sharing                           | ng plans, and other similar debts             |            |
| ☐Yes  | Other. Specify Purchases                                     |   |            |
| Synchrony Bank  | Last 4 digits of account number                              |   | \$0.00     |
| Nonpriority Creditor's Name PO Box 5937                       | When was the debt incurred?                                  | 2013 - 2014                                   | ·          |
| Bridgewater, NJ 08807-5937  Number Street City State Zlp Code | As of the date you file, the claim                           | is: Check all that apply                      |            |
| Who incurred the debt? Check one.                             |  |   |            |
| Debtor 1 only   | Contingent   |   |            |
| Debtor 2 only   | Unliquidated   |   |            |
| Debtor 1 and Debtor 2 only                                    | Disputed   | d alaim.                                      |            |
| At least one of the debtors and another                       | Type of NONPRIORITY unsecure  ☐ Student loans                | a ciaim:                                      |            |
| ☐ Check if this claim is for a community debt                 | ☐ Obligations arising out of a sepa                          | aration agreement or divorce that you did not |            |
| s the claim subject to offset?                                | report as priority claims                                    |   |            |
| s the claim subject to offset?  ■ No                          | report as priority claims  Debts to pension or profit-sharir | ng plans, and other similar debts             |            |

Debtor 1 Panayotis J. Koutropoulos

Entered 12/14/16 08:13:50

0 Desc Main

12/14/16 7:48AN

Document Page 24 of 54

Case number (if know) Debtor 1 Panayotis J. Koutropoulos 4.1 WebBank \$5,814.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 215 South State Street When was the debt incurred? Suite 800 Salt Lake City, UT 84111 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collections 4.1 Wells Fargo (Credit Cards) 5759 \$985.00 Last 4 digits of account number Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? 3/13 4137 121st Street Urbandale, IA 50323 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Purchases ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **AMEX** Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Department Part 2: Creditors with Nonpriority Unsecured Claims PO Box 297871 Fort Lauderdale, FL 33329 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Cach LLC Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 5980 Part 2: Creditors with Nonpriority Unsecured Claims **Denver, CO 80127** Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital 1 Bank Line **4.3** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: General Correspondence Part 2: Creditors with Nonpriority Unsecured Claims Po Box 30285

Salt Lake City, UT 84130

Last 4 digits of account number

| Debtor 1 Panayotis J. Koutropoulos  | 3.5  | Case number (if know)  |
|---|--|--|
| Name and Address Cavalry PO Box 520 Valhalla, NY 10595                    | On which entry in Part 1 or Part 2 did y Line 4.9 of (Check one):  Last 4 digits of account number | rou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |
|   | Last 4 digits of account number  |  |
| Name and Address Cavalry Investments, LLC 500 Summit Lake Drive Suite 400 | On which entry in Part 1 or Part 2 did y Line 4.9 of ( <i>Check one</i> ):                         | rou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |
| Valhalla, NY 10595  | Last 4 digits of account number  |  |
| Name and Address Citi PO Box 6500   | On which entry in Part 1 or Part 2 did y Line 4.8 of (Check one):                                  | ☐ Part 1: Creditors with Priority Unsecured Claims   |
| Sioux Falls, SD 57117-6500  |  | Part 2: Creditors with Nonpriority Unsecured Claims  |
| •   | Last 4 digits of account number  |  |
| Name and Address Citi PO Box 6500 Sioux Falls, SD 57117-6500              | On which entry in Part 1 or Part 2 did y Line 4.9 of (Check one):                                  | rou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |
|   | Last 4 digits of account number  |  |
| Name and Address Citibank NA PO Box 769006                                | On which entry in Part 1 or Part 2 did y Line <b>4.8</b> of ( <i>Check one</i> ):                  | ou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  |
| San Antonio, TX 78245   | Last 4 digits of account number  | , ,  |
|   | Last 4 digits of account number  |  |
| Name and Address Citibank NA PO Box 769006                                | On which entry in Part 1 or Part 2 did y Line <b>4.9</b> of ( <i>Check one</i> ):                  | rou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |
| San Antonio, TX 78245   |  | — Fait 2. Ordatoro With Horiphorty Gridocarda Grainio  |
|   | Last 4 digits of account number  |  |
| Name and Address FMA Alliance, Ltd 12339 Cutten Road                      | On which entry in Part 1 or Part 2 did y Line <b>4.10</b> of ( <i>Check one</i> ):                 | rou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |
| Houston, TX 77066   |  | — Fart 2. Creditors with Nonphority Onsecured Claims   |
|   | Last 4 digits of account number  |  |
| Name and Address Gecrb/Care Credit Attn: bankruptcy                       | On which entry in Part 1 or Part 2 did y Line 4.13 of (Check one):                                 | Part 1: Creditors with Priority Unsecured Claims   |
| Po Box 103104<br>Roswell, GA 30076  |  | Part 2: Creditors with Nonpriority Unsecured Claims  |
|   | Last 4 digits of account number  |  |
| Name and Address GECRB/Care Credit PO Box 965036                          | On which entry in Part 1 or Part 2 did y Line 4.13 of ( <i>Check one</i> ):                        | rou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |
| Orlando, FL 32896   | Last 4 digits of account number  |  |
| Name and Address Illinois Department of Revenue Bankruptcy Section        | On which entry in Part 1 or Part 2 did y Line 2.1 of (Check one):                                  | rou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |
| PO Box 64338<br>Chicago, IL 60664-0338                                    |  |  |
|   | Last 4 digits of account number  |  |
| Name and Address Wellsfargo Credit Bureau Dispute Resolution              | On which entry in Part 1 or Part 2 did y Line 4.17 of (Check one):                                 | rou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |
| PO Box 14517<br>Des Moines, IA 50306                                      | Last 4 digits of account number  |  |

Debtor 1 Panayotis J. Koutropoulos

Page 26 of 54 Case number (if know) Document

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                       |     |   |     | Total | Claim             |
|-----------------------|-----|---|-----|-------|-------------------|
|                       | 6a. | Domestic support obligations  | 6a. | \$    | 0.00              |
| Total                 |     |   |     |       |                   |
| claims<br>from Part 1 | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$    | 4,000.00          |
|                       | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$    | 0.00              |
|                       | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$    | 0.00              |
|                       | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$    | 4,000.00          |
| Total                 | 6f. | Student loans   | 6f. | Total | Claim <b>0.00</b> |
| claims<br>from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$    | 0.00              |
|                       | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$    | 0.00              |
|                       | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$    | 51,554.00         |
|                       | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$    | 51,554.00         |

Page 27 of 54 Document Fill in this information to identify your case: Panayotis J. Koutropoulos Debtor 1 Middle Name Last Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 George Stefanidis (Landlord)
21382 N. Grove Dr.
Lake Zurich, IL 60047

State what the contract or lease is for
Monthly

|                                | 0000 10 00210   | Docume   | nt Page 28 c          | of 54   | 12/14/16 7:48AN   |
|--------------------------------|---|--|-----------------------|---|---|
| Fill in this                   | information to identify your  | case:  |                       |   |   |
| Debtor 1                       | Panayotis J. Kou  | tropoulos  |                       |   |   |
|                                | First Name  | Middle Name  | Last Name             |   |   |
| Debtor 2<br>(Spouse if, filing | ng) First Name  | Middle Name  | Last Name             |   |   |
|                                |   |  |                       |   |   |
| United Stat                    | tes Bankruptcy Court for the:   | NORTHERN DISTRICT                                    | OF ILLINOIS           |   |   |
| Case numb                      | ber   |  |                       |   |   |
| (if known)                     |   |  |                       |   | ☐ Check if this is an   |
|                                |   |  |                       |   | amended filing  |
| Official                       | l Form 106H   |  |                       |   |   |
|                                | lule H: Your Cod  | ahtors   |                       |   | 12/15   |
| ociica                         | die II. Tour oou  | CDIOIS   |                       |   | 12/13   |
| ill it out, ar                 | nd number the entries in the<br>and case number (if known)<br>you have any codebtors? (If | boxes on the left. Attach<br>. Answer every question | the Additional Page t | o this page. On the top of a                      | ed, copy the Additional Page,<br>any Additional Pages, write  |
|                                |   |  |                       |   |   |
| ■ No<br>□ Yes                  |   |  |                       |   |   |
| L res                          | •   |  |                       |   |   |
|                                | hin the last 8 years, have you<br>a, California, Idaho, Louisiana                         |  |                       |   | tes and territories include   |
| ■ No.                          | Go to line 3.   |  |                       |   |   |
| ☐ Yes                          | s. Did your spouse, former spo  | use, or legal equivalent live                        | with you at the time? |   |   |
|                                |   |  |                       |   |   |
| in line<br>Form                | 2 again as a codebtor only i  | f that person is a guaran                            | tor or cosigner. Make | sure you have listed the cr                       | th you. List the person shown<br>editor on Schedule D (Official<br>edule E/F, or Schedule G to fill |
|                                | Column 1: Your codebtor<br>Name, Number, Street, City, State and Z                        | IP Code  |                       | Column 2: The credito<br>Check all schedules that | r to whom you owe the debt at apply:  |
| 3.1                            |   |  |                       | ☐ Schedule D, line                                |   |
|                                | Name  |  |                       | □ Schedule E/F, line                              |   |
|                                |   |  |                       | ☐ Schedule G, line _                              |   |
| -                              | Number Street   |  |                       |   |   |
|                                | City  | State  | ZIP Code              |   |   |
|                                |   |  |                       | _   |   |
| 3.2                            | Name  |  |                       | Schedule D, line                                  |   |
| '                              | IVAITIC   |  |                       | ☐ Schedule E/F, line ☐ Schedule G, line _         |   |
| _                              |   |  |                       | — Scriedule G, IIIIe _                            |   |
| ı                              | Number Street   |  |                       |   |   |

State

City

ZIP Code

Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Document Page 29 of 54  $^{12/14/16 \ 7:48AM}$ 

|                    | in this information otor 1   | , ,                              |   |   |                      |                  |                      |                              |                          |                              |                 |
|--------------------|--|----------------------------------|---|---|----------------------|------------------|----------------------|------------------------------|--------------------------|------------------------------|-----------------|
| Der                | 3101 1   | Panayous J.                      | Koutropoulos  |   |                      | _                |                      |                              |                          |                              |                 |
|                    | otor 2<br>buse, if filing)   |                                  |   |   |                      | _                |                      |                              |                          |                              |                 |
| Uni                | ted States Bankru  | ptcy Court for the               | NORTHERN DISTRIC  | T OF ILLINOIS                                   |                      | _                |                      |                              |                          |                              |                 |
|                    | se number  |                                  |   |   |                      |                  | □ A                  |                              | d filing<br>ent showir   | ng postpetition              |                 |
| O                  | fficial Form   | า 106l                           |   |   |                      |                  |                      | IM / DD/ Y                   |                          | g                            |                 |
| S                  | chedule I:   | Your Inc                         | ome   |   |                      |                  |                      | , 22, .                      |                          |                              | 12/15           |
| sup<br>spo<br>atta | plying correct infuse. If you are se chase she   | ormation. If you parated and you | sible. If two married peo<br>are married and not filir<br>r spouse is not filing wi<br>On the top of any addition | ng jointly, and your s<br>th you, do not includ | pouse i<br>le infori | is livi<br>matic | ing with<br>on about | you, incli<br>your spo       | ude infori<br>ouse. If m | mation about<br>ore space is | your<br>needed, |
| 1.                 | Fill in your emp   | loyment                          |   | Dobton 4  |                      |                  |                      | Dahtan                       |                          | :::                          |                 |
|                    | information.   |                                  |   | Debtor 1  |                      |                  |                      |                              |                          | iling spouse                 |                 |
|                    | If you have more than one job, attach a separate page with information about additional employers. |                                  | Employment status*  | ■ Employed                                      |                      |                  |                      | ☐ Employed<br>☐ Not employed |                          |                              |                 |
|                    |  |                                  |   | ☐ Not employed                                  |                      |                  |                      | ☐ Not employed               |                          |                              |                 |
|                    |  |                                  | Occupation  | Manager   |                      |                  |                      |                              |                          |                              |                 |
|                    | Include part-time<br>self-employed we  |                                  | Employer's name   | Charkies  |                      |                  |                      |                              |                          |                              |                 |
|                    | Occupation may or homemaker, it  |                                  | Employer's address  | 570 N. Schmale<br>Carol Stream, IL              |                      |                  |                      |                              |                          |                              |                 |
|                    |  |                                  | How long employed th  | nere? 8 Years                                   |                      |                  |                      |                              |                          |                              |                 |
|                    |  |                                  |   | *See Atta                                       | chmen                | t for            | Addition             | al Emplo                     | yment Inf                | ormation                     |                 |
| Par                | Give De  | etails About Mor                 | thly Income   |   |                      |                  |                      |                              |                          |                              |                 |
|                    | mate monthly incuse unless you are   |                                  | ate you file this form. If $y$  | ou have nothing to re                           | port for             | any I            | ine, write           | \$0 in the                   | space. In                | clude your no                | n-filing        |
|                    | ou or your non-filing<br>e space, attach a s   |                                  | ore than one employer, co<br>this form.   | mbine the information                           | for all e            | emplo            | yers for             | that perso                   | n on the li              | ines below. If               | you need        |
|                    |  |                                  |   |   |                      |                  | For Dek              | otor 1                       |                          | btor 2 or<br>ing spouse      |                 |
| 2.                 |  |                                  | ry, and commissions (becalculate what the monthly   |   | 2.                   | \$               | 2                    | ,000.00                      | \$                       | N/A                          |                 |
| 3.                 | Estimate and lis   | st monthly overt                 | me pay.   |   | 3.                   | +\$              |                      | 0.00                         | +\$                      | N/A                          |                 |
| 4.                 | Calculate gross  | s Income. Add lir                | ne 2 + line 3.  |   | 4.                   | \$               | 2,00                 | 00.00                        | \$                       | N/A                          |                 |

Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Document Page 30 of 54  $^{12/14/16}$ 

| Debt     | or 1           | Panayotis J. Koutropoulos   | _          | Case r    | number (if known)                      |         |                           |          |
|----------|----------------|---|------------|-----------|--|---------|---------------------------|----------|
|          |                |   |            |           | Debtor 1                               | non-f   | Debtor 2 or illing spouse |          |
|          | Cop            | y line 4 here   | 4.         | \$        | 2,000.00                               | \$      | N/A                       | -        |
| 5.       | List           | all payroll deductions:   |            |           |  |         |                           |          |
|          | 5a.            | Tax, Medicare, and Social Security deductions   | 5a.        | \$        | 0.00                                   | \$      | N/A                       | _        |
|          | 5b.            | Mandatory contributions for retirement plans  | 5b.        | \$        | 0.00                                   | \$      | N/A                       | _        |
|          | 5c.            | Voluntary contributions for retirement plans  | 5c.        | \$        | 0.00                                   | \$      | N/A                       |          |
|          | 5d.            | Required repayments of retirement fund loans  | 5d.        | \$        | 0.00                                   | \$      | N/A                       | -        |
|          | 5e.            | Insurance   | 5e.        | \$        | 0.00                                   | \$      | N/A                       | -        |
|          | 5f.<br>5g.     | Domestic support obligations Union dues   | 5f.<br>5g. | \$<br>    | 0.00                                   | \$      | N/A<br>N/A                |          |
|          | 5g.<br>5h.     | Other deductions. Specify:  | 5h.+       |           |  | + \$    | N/A                       | -        |
| 6        |                |   | _          | \$<br>\$  |  | · Ψ     |                           | -        |
| 6.<br>7. |                | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  ulate total monthly take-home pay. Subtract line 6 from line 4.   | 6.<br>7.   | » —<br>\$ | 2,000.00                               | э<br>\$ | N/A<br>N/A                | -        |
|          |                |   | •••        | <u> </u>  | 2,000.00                               | Ψ—      | IVA                       | -        |
| 8.       | Ra.            | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a.        | \$        | 0.00                                   | \$      | N/A                       |          |
|          | 8b.            | Interest and dividends  | 8b.        | \$—       | 0.00                                   | \$—     | N/A                       | -        |
|          | 8c.            | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce   |            | Ψ         | 0.00                                   | Ψ       | N/A                       | -        |
|          |                | settlement, and property settlement.  | 8c.        | \$        | 0.00                                   | \$      | N/A                       |          |
|          | 8d.            | Unemployment compensation   | 8d.        | \$        | 0.00                                   | \$      | N/A                       |          |
|          | 8e.            | Social Security   | 8e.        | \$        | 0.00                                   | \$      | N/A                       | _        |
|          | 8f.            | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:          | e<br>8f.   | \$        | 0.00                                   | \$      | N/A                       |          |
|          | 8g.            | Pension or retirement income  | 8g.        | \$        | 0.00                                   | \$      | N/A                       | -        |
|          | 8h.            | Other monthly income. Specify: Part Time Job  | 8h.+       | \$        | 1,732.00                               | + \$    | N/A                       | <u>.</u> |
| 9.       | Add            | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.         | \$        | 1,732.00                               | \$      | N/A                       | A .      |
| 10       | Calc           | ulate monthly income. Add line 7 + line 9.  | 10. \$     |           | 3,732.00 + \$                          |         | N/A = \$                  | 3,732.00 |
|          |                | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | ΙΟ.   Ψ    |           | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |         | - TVA                     | 3,732.00 |
| 11.      | State<br>Inclu | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your refriends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not                  | depend     |           | •                                      |         | hedule J.                 | 0.00     |
| 12.      |                | the amount in the last column of line 10 to the amount in line 11. The reset hat amount on the Summary of Schedules and Statistical Summary of Certaines  |            |           |  |         | 12. \$                    | 3,732.00 |
| 12       | D              | ou expect on increase or decrease within the year often year file this forms  | 2          |           |  |         |                           | y income |
| ı3.      | Do y           | ou expect an increase or decrease within the year after you file this form<br>No.   | ſ          |           |  |         |                           |          |
|          |                | Yes. Explain:   |            |           |  |         |                           |          |

Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Document Page 31 of 54

Debtor 1 Panayotis J. Koutropoulos Case number (if known)

# Official Form B 6I Attachment for Additional Employment Information

| Debtor              |                         |  |
|---------------------|-------------------------|--|
| Occupation          | Valet                   |  |
| Name of Employer    | UpFront Parking         |  |
| How long employed   |                         |  |
| Address of Employer |                         |  |
|                     | Saint Charles, IL 60174 |  |

Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Document Page 32 of 54  $^{12/14/16}$ 

|                    | in this information to identify your case:  |                           |                 |                                    |   |
|--------------------|---|---------------------------|-----------------|------------------------------------|---|
| Deb                | Panayotis J. Koutropoulos   |                           |                 | k if this is:<br>An amended filing |   |
|                    | otor 2ouse, if filing)  |                           |                 | A supplement show                  | ving postpetition chapter the following date: |
| Unit               | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILL   | INOIS                     | Ī               | MM / DD / YYYY                     |   |
|                    | se number<br>nown)  |                           |                 |                                    |   |
| Of                 | fficial Form 106J   |                           |                 |                                    |   |
|                    | chedule J: Your Expenses  |                           |                 |                                    | 12/15   |
| info<br>nur<br>Par | as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to the mber (if known). Answer every question.  11: Describe Your Household |                           |                 |                                    |   |
| 1.                 | Is this a joint case?   |                           |                 |                                    |   |
|                    | ■ No. Go to line 2.  ☐ Yes. Does Debtor 2 live in a separate household?   |                           |                 |                                    |   |
|                    | ☐ No<br>☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expens</i>   | ses for Separate Housel   | nold of Debt    | or 2.                              |   |
| 2.                 | Do you have dependents? ■ No  |                           |                 |                                    |   |
|                    | Do not list Debtor 1 and Debtor 2.    Yes. Fill out this information for each dependent   | •                         |                 | Dependent's age                    | Does dependent live with you?                 |
|                    | Do not state the  |                           |                 |                                    | □ No  |
|                    | dependents names.   |                           |                 |                                    | ☐ Yes   |
|                    |   |                           |                 |                                    | □ No<br>□ Yes                                 |
|                    |   |                           |                 |                                    | ☐ Yes   |
|                    |   |                           |                 |                                    | ☐ Yes   |
|                    |   |                           |                 |                                    | □ No  |
|                    |   |                           |                 |                                    | ☐ Yes   |
| 3.                 | Do your expenses include No   |                           |                 |                                    |   |
|                    | expenses of people other than yourself and your dependents?   |                           |                 |                                    |   |
| Dor                | t 2: Estimate Your Ongoing Monthly Expenses   |                           |                 |                                    |   |
| Est<br>exp         | timate your expenses as of your bankruptcy filing date unless benses as of a date after the bankruptcy is filed. If this is a sublicable date.  |                           |                 |                                    |   |
| the                | lude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I</i> ficial Form 106I.)  |                           |                 | Your exp                           | enses   |
| ,                  | ,   |                           |                 |                                    |   |
| 4.                 | The rental or home ownership expenses for your residence payments and any rent for the ground or lot.   | e. Include first mortgage | 4. \$           |                                    | 1,600.00                                      |
|                    | If not included in line 4:  |                           |                 |                                    |   |
|                    | 4a. Real estate taxes   |                           | 4a. \$          |                                    | 0.00  |
|                    | 4b. Property, homeowner's, or renter's insurance  |                           | 4b. \$          |                                    | 25.00   |
|                    | 4c. Home maintenance, repair, and upkeep expenses   |                           | 4c. \$          |                                    | 0.00  |
| 5.                 | 4d. Homeowner's association or condominium dues  Additional mortgage payments for your residence, such as   | home equity loans         | 4d. \$<br>5. \$ |                                    | 0.00  |
| J.                 | jour mortgage paymente for your residence, such as  | nome equity leans         | υ. ψ            |                                    | 0.00  |

| Debtor 1       | Panayotis J. Koutropoulos  | Case num                    | ber (if known) |                          |
|----------------|--|-----------------------------|----------------|--------------------------|
| 6. <b>Util</b> | ities:   |                             |                |                          |
| 6a.            |  | 6a.                         | \$             | 200.00                   |
| 6b.            | Water, sewer, garbage collection   | 6b.                         |                | 120.00                   |
| 6c.            | Telephone, cell phone, Internet, satellite, and cable services                                 | 6c.                         | \$             | 290.00                   |
| 6d.            | Other. Specify:  | 6d.                         | \$             | 0.00                     |
|                | od and housekeeping supplies   | 7.                          | \$             | 275.00                   |
|                | Idcare and children's education costs  | 8.                          | \$             | 0.00                     |
|                | thing, laundry, and dry cleaning   | 9.                          | \$             | 50.00                    |
|                | sonal care products and services   | 10.                         | \$             | 0.00                     |
|                | dical and dental expenses  | 11.                         | ·              | 0.00                     |
|                | nsportation. Include gas, maintenance, bus or train fare.                                      |                             | Ψ              | 0.00                     |
|                | not include car payments.  | 12.                         | \$             | 400.00                   |
|                | ertainment, clubs, recreation, newspapers, magazines, and books                                | 13.                         | \$             | 0.00                     |
|                | aritable contributions and religious donations   | 14.                         | · -            | 0.00                     |
|                | urance.  |                             |                | 0.00                     |
|                | not include insurance deducted from your pay or included in lines 4 or 20.                     |                             |                |                          |
|                | Life insurance   | 15a.                        | \$             | 0.00                     |
| 15b            | . Health insurance   | 15b.                        | \$             | 150.00                   |
| 150            | . Vehicle insurance  | 15c.                        | \$             | 100.00                   |
|                | l. Other insurance. Specify:   | 15d.                        | · <u> </u>     | 0.00                     |
|                | res. Do not include taxes deducted from your pay or included in lines 4 or 20.                 |                             | <u> </u>       | 0.00                     |
|                | ecify: IRS repayment   | 16.                         | \$             | 300.00                   |
|                | ecify: Quartley taxes  |                             | \$             | 500.00                   |
|                |  |                             | Ψ              | 300.00                   |
|                | tallment or lease payments: . Car payments for Vehicle 1                                       | 17a.                        | ¢              | 0.00                     |
|                |  | 17a.<br>17b.                | \$             |                          |
|                | Car payments for Vehicle 2   |                             | ·              | 0.00                     |
|                | Other Specify: Gym Membership  | 17c.                        | ·              | 60.00                    |
|                | l. Other. Specify:   | 17d.                        | <b>&gt;</b>    | 0.00                     |
|                | ur payments of alimony, maintenance, and support that you did not report as                    |                             | ¢              | 0.00                     |
|                | ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).                  | 10.                         |                |                          |
|                | er payments you make to support others who do not live with you.                               | 40                          | \$             | 0.00                     |
|                | ecify:   | 19.                         |                |                          |
|                | ner real property expenses not included in lines 4 or 5 of this form or on School              | e <b>auie i: Yo</b><br>20a. |                | 0.00                     |
|                | . Mortgages on other property  |                             | · -            | 0.00                     |
|                | Real estate taxes  | 20b.                        | · <u> </u>     | 0.00                     |
|                | . Property, homeowner's, or renter's insurance   | 20c.                        | ·              | 0.00                     |
|                | l. Maintenance, repair, and upkeep expenses  | 20d.                        | · -            | 0.00                     |
|                | Homeowner's association or condominium dues  | 20e.                        | ·              | 0.00                     |
| l. Oth         | er: Specify:   | 21.                         | +\$            | 0.00                     |
| Cal            | oulete your monthly expenses   |                             |                |                          |
|                | culate your monthly expenses   |                             | •              | 4 070 00                 |
|                | Add lines 4 through 21.  |                             | \$             | 4,070.00                 |
| 220            | c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2             |                             | \$             |                          |
| 220            | Add line 22a and 22b. The result is your monthly expenses.                                     |                             | \$             | 4,070.00                 |
| ادی ج          | culate your monthly net income.  |                             |                |                          |
|                | . Copy line 12 (your combined monthly income) from Schedule I.                                 | 23a.                        | \$             | 2 722 00                 |
|                | Copy your monthly expenses from line 22c above.  | 23a.<br>23b.                |                | 3,732.00<br>4,070.00     |
| 230            | . Copy your monthly expenses from line 22c above.  | 230.                        | -Ф             | 4,070.00                 |
| 230            | Subtract your monthly expenses from your monthly income.                                       |                             |                |                          |
| 200            | The result is your <i>monthly net income</i> .   | 23c.                        | \$             | -338.00                  |
| 4 Do           | you expect an increase or decrease in your expenses within the year after y                    | ou file this                | form?          |                          |
| For            | example, do you expect to finish paying for your car loan within the year or do you expect you |                             |                | or decrease because of a |
|                | lification to the terms of your mortgage?  |                             |                |                          |
|                | No   |                             |                |                          |
|                | Yes. Explain here:   |                             |                |                          |

Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Document Page 34 of 54 Desc Main  $\frac{12/14/16}{12/14/16}$ 

| Fill in this inform   | mation to identify your                          | case:                    |                        |                          |  |
|---|--|--------------------------|------------------------|--------------------------|--|
| Debtor 1  | Panayotis J. Kou                                 |                          |                        |                          |  |
|   | First Name                                       | Middle Name              | Last Name              |                          |  |
| Debtor 2<br>(Spouse if, filing)                             | First Name                                       | Middle Name              | Last Name              |                          |  |
| United States Ba  | inkruptcy Court for the:                         | NORTHERN DISTRICT        | OF ILLINOIS            |                          |  |
| Case number(if known)                                       |  |                          |                        |                          | ☐ Check if this is an amended filing   |
| Official Form   | -  | ın Individual            | Debtor's S             | Schedules                | 12/15  |
| You must file this<br>obtaining money<br>years, or both. 19 | s form whenever you fi                           | n connection with a bank | s or amended schedu    | ıles. Making a false sta | tement, concealing property, or<br>000, or imprisonment for up to 20         |
| Did you pa  | y or agree to pay some                           | one who is NOT an attor  | ney to help you fill o | ut bankruptcy forms?     |  |
| ■ No  |  |                          |                        |                          |  |
| ☐ Yes. N  | Name of person                                   |                          |                        |                          | nkruptcy Petition Preparer's Notice,<br>n, and Signature (Official Form 119) |
|   | Ity of perjury, I declare<br>e true and correct. | that I have read the sum | mary and schedules     | filed with this declarat | ion and  |
| X /s/ Pan   | ayotis J. Koutropou                              | los                      | X                      |                          |  |
| Panayo  | otis J. Koutropoulos<br>re of Debtor 1           |                          | Signature              | e of Debtor 2            |  |

Date

Date **December 14, 2016** 

Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Document Page 35 of 54 Page 35 of 54 Desc Main Page 35 of 54

| Fill in          | this inform                   | ation to identify you                      | r case:                                    |  |  |   |
|------------------|-------------------------------|--|--|--|--|---|
| Debto            | r 1                           | Panayotis J. Kou                           | utropoulos                                 |  |  |   |
|                  |                               | First Name                                 | Middle Name                                | Last Name  |  |   |
| Debto<br>(Spouse |                               | First Name                                 | Middle Name                                | Last Name  |  |   |
| United           | States Ban                    | kruptcy Court for the:                     | NORTHERN DISTRICT                          | OF ILLINOIS  |  |   |
| Cooo             |                               |  |  |  |  |   |
| (if knowr        | number                        |  |  |  | _  | Check if this is an amended filing                    |
| Offic            | cial For                      | m 107                                      |  |  |  |   |
| Stat             | ement                         | of Financial                               | Affairs for Indivi                         | duals Filing for B   | ankruptcy                                  | 4/16  |
| nform            | ation. If mo<br>er (if known) | re space is needed,<br>. Answer every ques | attach a separate sheet to                 | are filing together, both are this form. On the top of an  |  |   |
|                  |                               | current marital statu                      |  |  |  |   |
| _                |                               |  |  |  |  |   |
|                  | I Married<br>I Not marri      | ad   |  |  |  |   |
|                  | Not main                      | eu   |  |  |  |   |
| 2. Di            | uring the las                 | st 3 years, have you                       | lived anywhere other than                  | where you live now?  |  |   |
|                  | No                            |  |  |  |  |   |
|                  | Yes. List                     | all of the places you l                    | ived in the last 3 years. Do n             | not include where you live nov   | V.   |   |
| D                | ebtor 1 Prid                  | or Address:                                | Dates Debtor 1 lived there                 | Debtor 2 Prior Ac  | ldress:                                    | Dates Debtor 2<br>lived there                         |
|                  |                               |  |  | gal equivalent in a communevada, New Mexico, Puerto R  |  |   |
|                  | l No                          |  |  |  |  |   |
|                  | Yes. Mak                      | e sure you fill out Sch                    | nedule H: Your Codebtors (C                | Official Form 106H).   |  |   |
| Part 2           | Explain                       | the Sources of You                         | r Income                                   |  |  |   |
|                  |                               |  |  |  |  |   |
| Fi               | II in the total               | amount of income yo                        | u received from all jobs and               | ng a business during this you<br>all businesses, including part<br>we together, list it only once ur | -time activities.                          | endar years?  |
|                  | l No                          |  |  |  |  |   |
|                  | Yes. Fill i                   | n the details.                             |  |  |  |   |
|                  |                               |  | Debtor 1                                   |  | Debtor 2                                   |   |
|                  |                               |  | Sources of income<br>Check all that apply. | Gross income<br>(before deductions and<br>exclusions)  | Sources of income<br>Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |
|                  |                               |  |  |  |  |   |
|                  |                               | f current year until<br>for bankruptcy:    | ■ Wages, commissions, bonuses, tips        | \$11,012.00  | ☐ Wages, commissions, bonuses, tips        |   |

Entered 12/14/16 08:13:50 Desc Main Case 16-39273 Filed 12/14/16 Doc 1

Page 36 of 54
Case number (if known) Document Debtor 1 Panayotis J. Koutropoulos

|    |   |  |  | Debtor 1   |   | Debtor 2                                 |                                      |   |
|----|---|--|--|--|---|--|--------------------------------------|---|
|    |   |  |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)   | Sources of inc                           |                                      | Gross income<br>(before deductions<br>and exclusions) |
|    | or last caler<br>anuary 1 to              | ndar year:<br>December                         | 31, 2015 )   | ■ Wages, commissions, bonuses, tips  | \$15,937.00   | ☐ Wages, combonuses, tips                | missions,                            |   |
|    |   |  |  | Operating a business   |   | ☐ Operating a                            | business                             |   |
|    |   | dar year be<br>December                        |  | ■ Wages, commissions, bonuses, tips  | \$11,333.00   | ☐ Wages, combonuses, tips                | missions,                            |   |
|    |   |  |  | ☐ Operating a business   |   | ☐ Operating a                            | business                             |   |
| 5. | Include in and other winnings.  List each | come regard<br>public benef<br>If you are fili | lless of wheth<br>fit payments;<br>ng a joint cas<br>he gross inco | e during this year or the two<br>ner that income is taxable. Exa<br>pensions; rental income; inter<br>se and you have income that y<br>ome from each source separat    | amples of other income are a<br>est; dividends; money collec-<br>you received together, list it co  | ted from lawsuits;<br>only once under De | royalties; and<br>ebtor 1.           |   |
|    |   |  |  | Debtor 1   |   | Debtor 2                                 |                                      |   |
|    |   |  |  | Sources of income Describe below.  | Gross income from<br>each source<br>(before deductions and<br>exclusions)   | Sources of inc<br>Describe below         |                                      | Gross income<br>(before deductions<br>and exclusions) |
| Pa | rt 3: Lis                                 | t Certain Pa                                   | yments You   | Made Before You Filed for I  | Bankruptcy  |  |                                      |   |
| 6. | Are eithe ☐ No.                           | Neither De                                     | ebtor 1 nor D  | 's debts primarily consumer<br>Debtor 2 has primarily consu<br>a personal, family, or househol   | imer debts. Consumer debt   | s are defined in 11                      | U.S.C. § 10°                         | 1(8) as "incurred by an                               |
|    |   | □ No. □ Yes                                    | Go to line 7<br>List below e<br>paid that cr<br>not include        | ore you filed for bankruptcy, die<br>cach creditor to whom you paireditor. Do not include payment<br>payments to an attorney for the<br>t on 4/01/19 and every 3 years | d a total of \$6,425* or more interest of the desired at the state of the stat | n one or more pay<br>ations, such as ch  | ments and the                        | nd alimony. Also, do                                  |
|    | Yes.                                      |  |  | or both have primarily consu<br>ore you filed for bankruptcy, di   |   | I of \$600 or more?                      | <b>,</b>                             |   |
|    |   | □ No.  | Go to line 7   | <b>7</b> .   |   |  |                                      |   |
|    |   | ■ Yes  | include pay  | each creditor to whom you pai<br>ments for domestic support ol<br>this bankruptcy case.  |   |  |                                      |   |
|    | Creditor                                  | 's Name and                                    | d Address  | Dates of payme   | nt Total amount   | Amount you still owe                     | Was this p                           | payment for   |
|    | P.O. Bo                                   |  | Service<br>19101-7346  | June, July,<br>August, 2016  | \$1,200.00  | \$4,000.00                               | ☐ Mortgag ☐ Car ☐ Credit C ☐ Loan Re | Card  |

☐ Suppliers or vendors ■ Other IRs Debt.

Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main

Debtor 1 Panayotis J. Koutropoulos

Panayotis J. Koutropoulos

Document Page 37 of 54

Case number (if known)

| 7.  | Within 1 year before you filed for bankrupt<br>Insiders include your relatives; any general pa<br>of which you are an officer, director, person in<br>a business you operate as a sole proprietor. 1<br>alimony.           | ortners; relatives of any gen<br>control, or owner of 20% o | eral partners; partner<br>r more of their voting | erships of which yo<br>g securities; and ar | u are a genera<br>ny managing a | al partner; corporations agent, including one for |
|-----|--|---|--|---|---------------------------------|---|
|     | ■ No   |   |  |   |                                 |   |
|     | ☐ Yes. List all payments to an insider.  |   |  |   |                                 |   |
|     | Insider's Name and Address   | Dates of payment  | Total amount paid                                | Amount you still owe                        | Reason for                      | this payment                                      |
| 8.  | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos   |   | ments or transfer a                              | any property on a                           | ccount of a d                   | ebt that benefited an                             |
|     | ■ No   |   |  |   |                                 |   |
|     | ☐ Yes. List all payments to an insider   |   |  |   |                                 |   |
|     | Insider's Name and Address   | Dates of payment  | Total amount paid                                | Amount you still owe                        | Reason for Include cred         | this payment<br>litor's name                      |
| Pai | rt 4: Identify Legal Actions, Repossession   | ns, and Foreclosures  |  |   |                                 |   |
| 9.  | Within 1 year before you filed for bankrupte. List all such matters, including personal injury modifications, and contract disputes.  ■ No □ Yes. Fill in the details.   |   |  |   |                                 |   |
|     | Case title   | Nature of the case  | Court or agency                                  |   | Status of th                    | ne case   |
|     | Case number  |   |  |   |                                 |   |
| 10. | Within 1 year before you filed for bankrupte. Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  |   | erty repossessed, f                              | oreclosed, garnis                           | hed, attached                   | d, seized, or levied?                             |
|     | Creditor Name and Address  | Describe the Property                                       |  | Date  |                                 | Value of the                                      |
|     | Creditor Name and Address  |   |  | Date  |                                 | property  |
|     |  | Explain what happened                                       |  |   |                                 |   |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No  Yes. Fill in the details.   |   | luding a bank or fiı                             | nancial institution                         | , set off any a                 | amounts from your                                 |
|     | Creditor Name and Address  | Describe the action the                                     | creditor took                                    |   | action was                      | Amount  |
| 12. | taken  2. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  ■ No □ Yes |   |  |   |                                 |   |
|     | The Liet Contain Citte and Contain utions  |   |  |   |                                 |   |
| Pa  | rt 5: List Certain Gifts and Contributions   |   |  |   |                                 |   |
| 13. | Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift.  | tcy, did you give any gifts                                 | s with a total value                             | of more than \$60                           | 0 per person                    | ?   |
|     | Gifts with a total value of more than \$600 per person   | Describe the gifts  |  | Dates<br>the g                              | s you gave<br>ifts              | Value   |
|     | Person to Whom You Gave the Gift and Address:  |   |  |   |                                 |   |

Desc Main Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50

Page 38 of 54 Case number (if known) Document Debtor 1 Panayotis J. Koutropoulos 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You David M. Siegel & Associates \$1,365.00 12/30/14-7/31/ **Attorney Fees** 790 Chaddick Drive 15 Wheeling, IL 60090 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not

include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

**Person Who Received Transfer** Description and value of Describe any property or Date transfer was payments received or debts **Address** property transferred made paid in exchange Person's relationship to you

Filed 12/14/16 Entered 12/14/16 08:13:50 Document

Desc Main

Page 39 of 54 ase number (if known)

Debtor 1 Panayotis J. Koutropoulos

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Describe the contents Do you still Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Do you still Describe the contents Name of Storage Facility Who else has or had access Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. П **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code)

#### Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Document

Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Page 40 of 54 Case number (if known)

Debtor 1 Panayotis J. Koutropoulos

| 24. | Has any governmental unit notified yo   | u that you   | u may be liable or potentially liable                                     | e uno | der or in violation of an environm   | ental law?         |  |
|-----|---|--------------|---|-------|--|--------------------|--|
|     | Yes. Fill in the details.   |              |   |       |  |                    |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP C  | ode)         | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) | ıd    | Environmental law, if you know it  | Date of notice     |  |
| 25. | Have you notified any governmental u  | nit of any   | release of hazardous material?  |       |  |                    |  |
|     | ■ No<br>□ Yes. Fill in the details.   |              |   |       |  |                    |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP C  | ode)         | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) | ıd    | Environmental law, if you know it  | Date of notice     |  |
| 26. | Have you been a party in any judicial o   | or adminis   | strative proceeding under any envi  | iron  | mental law? Include settlements  | and orders.        |  |
|     | ■ No □ Yes. Fill in the details.  |              |   |       |  |                    |  |
|     | Case Title Case Number  |              | Court or agency Name Address (Number, Street, City, State and ZIP Code)   | Na    | ture of the case   | Status of the case |  |
| Par | t 11: Give Details About Your Busines   | ss or Con    | nections to Any Business  |       |  |                    |  |
| 27. | Within 4 years before you filed for ban   | kruptcy, d   | did you own a business or have ar   | ny of | f the following connections to any   | / business?        |  |
|     | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time |              |   |       |  |                    |  |
|     | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)                        |              |   |       |  |                    |  |
|     | ☐ A partner in a partnership  |              |   |       |  |                    |  |
|     | ☐ An officer, director, or managing executive of a corporation  |              |   |       |  |                    |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation                                 |              |   |       |  |                    |  |
|     | No. None of the above applies. Go to Part 12.   |              |   |       |  |                    |  |
|     | ☐ Yes. Check all that apply above a   | nd fill in t | he details below for each business  | s.    |  |                    |  |
|     | Business Name<br>Address  | De           | scribe the nature of the business   |       | Employer Identification number<br>Do not include Social Security number or |                    |  |
|     | (Number, Street, City, State and ZIP Code)  | Na           | me of accountant or bookkeeper  |       | Dates business existed   | number of fine.    |  |
| 28. | Within 2 years before you filed for bar institutions, creditors, or other parties                             |              | did you give a financial statement  | to a  | nyone about your business? Incl  | ude all financial  |  |
|     | ■ No □ Yes. Fill in the details below.  |              |   |       |  |                    |  |
|     | Name<br>Address<br>(Number, Street, City, State and ZIP Code)   | Da           | te Issued   |       |  |                    |  |
|     |   |              |   |       |  |                    |  |

Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Case 16-39273 Doc 1

Page 41 of 54
Case number (if known) Document Debtor 1 Panayotis J. Koutropoulos

| Part 1            | 2: Sign Below                             |   |   |
|-------------------|---|---|---|
| are tru<br>with a | e and correct. I understand that n        | ent of Financial Affairs and any attachments, and I on aking a false statement, concealing property, or oles up to \$250,000, or imprisonment for up to 20 years. | btaining money or property by fraud in connection |
| /s/ Pa            | anayotis J. Koutropoulos                  |   |   |
|                   | yotis J. Koutropoulos<br>ture of Debtor 1 | Signature of Debtor 2   |   |
| Date              | December 14, 2016                         | Date  |   |
| Did yo            | u attach additional pages to Your         | Statement of Financial Affairs for Individuals Filing   | g for Bankruptcy (Official Form 107)?             |
| ■ No              |   |   |   |
| ☐ Yes             |   |   |   |
| Did yo            | u pay or agree to pay someone w           | ho is not an attorney to help you fill out bankruptcy   | y forms?  |
| ■ No              |   |   |   |
| ☐ Yes             | . Name of Person . Attach the             | e Bankruptcy Petition Preparer's Notice, Declaration, a   | and Signature (Official Form 119).                |

Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Document Page 42 of 54

| Debtor 1                    | Panayotis J. Kou         | tropoulos         |             |                                      |
|-----------------------------|--------------------------|-------------------|-------------|--------------------------------------|
|                             | First Name               | Middle Name       | Last Name   |                                      |
| Debtor 2                    |                          |                   |             |                                      |
| Spouse if, filing)          | First Name               | Middle Name       | Last Name   |                                      |
| Inited States Bacase number | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |                                      |
| f known)                    |                          |                   |             | ☐ Check if this is an amended filing |

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt?    | Did you claim the property as exempt on Schedule C? |
|---|--|---|
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                               | <u>_</u>  |
| Description of  | ☐ Retain the property and enter into a<br>Reaffirmation Agreement. | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                               |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                               |   |
| Description of  | Retain the property and enter into a Reaffirmation Agreement.      | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                               |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                               |   |
| Description of  | Retain the property and enter into a Reaffirmation Agreement.      | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                               |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □No   |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main

Page 43 of 54 Document Debtor 1 Panayotis J. Koutropoulos Case number (if known) name: ☐ Yes ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt: Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? Lessor's name: George Stefanidis (Landlord) ☐ No Yes Description of leased Monthly Property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. /s/ Panayotis J. Koutropoulos

Panayotis J. Koutropoulos

December 14, 2016 Date

Signature of Debtor 2

Date

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |  |
|------------|--------------------|--|
| \$245      | filing fee         |  |
| \$75       | administrative fee |  |
| + \$15     | trustee surcharge  |  |
| \$335      | total fee          |  |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Document Page 48 of 54

B2030 (Form 2030) (12/15)

#### **United States Bankruptcy Court** Northern District of Illinois

| In r | e Panayotis J. Koutropoulos   |   | Case No                                   | Э.                     |                          |
|------|---|---|---|------------------------|--------------------------|
|      |   | Debtor(s)   | Chapter                                   | 7                      |                          |
|      | DISCLOSURE OF COMPENSA  | ATION OF ATTO   | RNEY FOR I                                | DEBTOR(S)              |                          |
| 1.   | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or   | the petition in bankruptcy  | , or agreed to be pa                      | id to me, for service  | that<br>s rendered or to |
|      | For legal services, I have agreed to accept   |   | \$  | 1,365.00               |                          |
|      | Prior to the filing of this statement I have received   |   |   | 1,365.00               |                          |
|      | Balance Due   |   |   | 0.00                   |                          |
| 2.   | The source of the compensation paid to me was:  |   |   |                        |                          |
|      | ■ Debtor □ Other (specify):   |   |   |                        |                          |
| 3.   | The source of compensation to be paid to me is:   |   |   |                        |                          |
|      | ■ Debtor □ Other (specify):   |   |   |                        |                          |
| 4.   | ■ I have not agreed to share the above-disclosed compensation   | ntion with any other persor   | unless they are me                        | embers and associate   | es of my law firm.       |
|      | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names  |   |   |                        | ny law firm. A           |
| 5.   | In return for the above-disclosed fee, I have agreed to render  | r legal service for all aspec   | ets of the bankruptc                      | y case, including:     |                          |
|      | <ul> <li>a. Analysis of the debtor's financial situation, and rendering</li> <li>b. Preparation and filing of any petition, schedules, stateme</li> <li>c. Representation of the debtor at the meeting of creditors a</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to redu agreements and applications as needed; pr avoidance of liens on household goods.</li> </ul> | nt of affairs and plan which<br>nd confirmation hearing, a<br>ace to market value; ex | h may be required;<br>and any adjourned h | earings thereof;       | mation                   |
| 6.   | By agreement with the debtor(s), the above-disclosed fee do<br>Representation of the debtors in any discha-<br>cases), or any other adversary proceeding.   |   |   | nces (except in C      | hapter 13                |
|      | C   | CERTIFICATION   |   |                        |                          |
| this | I certify that the foregoing is a complete statement of any agbankruptcy proceeding.  | reement or arrangement fo   | r payment to me fo                        | r representation of th | ne debtor(s) in          |
| ١,   | December 14, 2016   | /s/ David M. Sieg   | ıel                                       |                        |                          |
|      | Date  | David M. Siegel   |   |                        |                          |
|      |   | Signature of Attorn   |   |                        |                          |
|      |   | David M. Siegel of 790 Chaddick Dr  |   |                        |                          |
|      |   | Wheeling, IL 600  |   |                        |                          |
|      |   | (847) 520-8100  |   |                        |                          |
|      |   | Name of law firm  |   |                        |                          |

#### **Chapter 7 Bankruptcy Retainer Agreement**

This agreement acknowledges that the undersigned individual(s) [Client(s)] hereby retains and employs the Law Firm of DAVID M. SIEGEL & ASSOCIATES [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney as follows:

- a) A FLAT FEE as specified in paragraph H will be required to file a bankruptcy petition for the Client and for representation of the Client through discharge. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation shall begin upon execution of this agreement and tender of the initial payment, and will continue until the end of the case. The fee includes the preparation, review, and revision of the bankruptcy petition, communications with the Client, representation and appearance at the §341 Meeting of Creditors and §2004 examinations as necessary, communication with the bankruptcy and United States trustees, communication with creditors, review and completion of reaffirmation agreements, and court appearances.
- c) The fee **does not** include representation in any adversarial proceedings. The Client and Attorney may enter in to an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- d) Additional Fees:
  - A fee of \$250.00 shall be added in the event that Client misses the scheduled §341 Meeting of Creditors.
  - A fee of \$100.00 shall be added to amend Schedules D, E, and F to include creditors who were not originally provided by the Client. The Client has the full responsibility to ensure that all creditors are listed.
  - A fee of \$25.00 shall be added for any non-sufficient/returned checks. Post-dated checks are not accepted and will be voided upon receipt.
  - A fee of \$820.00 shall be added to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- e) The Client will be billed on any outstanding balance at the rate of \$100.00 every two weeks. Clients who fail to make payments as required will be assessed late fees in the amount of \$25.00 per billing period plus interest at the rate of 18% per year on any unpaid balance.
- f) No case shall be filed until all fees are paid in full.
- g) In the event that a Client pays the flat fee in full, and later elects to not proceed with the case, the Client is entitled to a refund of the court costs and filing fees only.

#### **Important Bankruptcy Information**

#### **Debts that are Discharged**

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

#### **Debts that are Not Discharged**

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

- a) Debts for most taxes;
- b) Debts that are in the nature of alimony, maintenance, or support;
- c) Debts for student loans;

H.

- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e) Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated;
- f) Some debts that are not properly listed by the Client;
- g) Debts that the bankruptcy court specifically determines to be non-dischargeable;
- h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

The FLAT FEE for representation in this matter will be \$ 1,700°°

|                 | eement in its entirety, understands it fully, has had an ent, is satisfied with it, and accepts it in its entirety. |
|-----------------|---|
| Date: 12 /30/14 | Signed: Hould   |
|                 | Print: Panayotis J Koutropoulos   |
|                 |   |
| Date:           | Signed:   |
|                 | Print:  |
|                 |   |

Signed:

Case 16-39273 Doc 1 Filed 12/14/16 Entered 12/14/16 08:13:50 Desc Main Document Page 51 of 54  $^{12/14/16}$ 

### **United States Bankruptcy Court** Northern District of Illinois

| In re | Panayotis J. Koutropoulos                  |   | Case No.            |                           |  |  |  |
|-------|--|---|---------------------|---------------------------|--|--|--|
|       |  | Debtor(s)   | Debtor(s) Chapter 7 |                           |  |  |  |
|       | VERIFICATION OF CREDITOR MATRIX            |   |                     |                           |  |  |  |
|       |  | Number of C   | Creditors:          | 28                        |  |  |  |
|       | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credito                                    | rs is true and      | correct to the best of my |  |  |  |
| Date: | December 14, 2016                          | /s/ Panayotis J. Koutropoulos Panayotis J. Koutropoulos Signature of Debtor |                     |                           |  |  |  |

AMEX
Bankruptcy Department
PO Box 981535
El Paso, TX 79998-1535

AMEX

Attn: Bankruptcy Department PO Box 297871 Fort Lauderdale, FL 33329

Avant Credit Corporation 640 N Lasalle St Chicago, IL 60654

Cach LLC PO Box 5980 Denver, CO 80127

Cap One Bankruptcy Dept. PO Box 30285 Salt Lake City, UT 84130-0285

Capital 1 Bank Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130

Cavalry PO Box 520 Valhalla, NY 10595

Cavalry Investments, LLC 500 Summit Lake Drive Suite 400 Valhalla, NY 10595

CB/Express PO Box 337003 NorthGlenn, CO 80233-7003

Chase P.o. Box 15298 Wilmington, DE 19850 Chase Bank Attn: Bankruptcy Dept Po Box 15298 Wilmington, DE 19850

Citi Attn: Bankruptcy Department PO Box 6241 Sioux Falls, SD 57717

Citi PO Box 6500 Sioux Falls, SD 57117-6500

Citibank NA PO Box 769006 San Antonio, TX 78245

Discover Bank PO Box 15316 Wilmington, DE 19850

FMA Alliance, Ltd 12339 Cutten Road Houston, TX 77066

Gecrb/Care Credit Attn: bankruptcy Po Box 103104 Roswell, GA 30076

GECRB/Care Credit PO Box 965036 Orlando, FL 32896

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

IRS
Internal Revenue Service
P.O. Box 7346
Philadelphia, PA 19101-7346

Prfrd Cus Ac Po Box 94498 Las Vegas, NV 89193

Quick Lane/Citi CBNA PO Box 6497 Sioux Falls, SD 57117

SYNCB/Care Credit PO Box 965036 Orlando, FL 32896-5036

SYNCB/HH Gregg PO Box 965036 Orlando, FL 32896

Synchrony Bank PO Box 5937 Bridgewater, NJ 08807-5937

WebBank 215 South State Street Suite 800 Salt Lake City, UT 84111

Wells Fargo (Credit Cards) Bankruptcy Department 4137 121st Street Urbandale, IA 50323

Wellsfargo Credit Bureau Dispute Resolution PO Box 14517 Des Moines, IA 50306